

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 09929818		FILING DATE		
							APPLICANT(S)				
CLAIMS											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			A		B	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	1						51				
2							52				
3							53				
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46							96				
47							97				
48							98				
49							99				
50							100				
TOTAL IND.	9		9				TOTAL IND.				
TOTAL DEP.	31		28				TOTAL DEP.				
TOTAL CLAIMS	40		37				TOTAL CLAIMS				

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

FORM PTO-1360, REV. 1-79

U.S. DEPARTMENT OF COMMERCE  
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